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The Resilience of Ethnic Culture: Chinese Herbalists in the American Medical Profession ¹

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From the mid-nineteenth to the first half of the twentieth century, Chinese herbalists offered indispensable medical services to both Chinese and non-Chinese patrons in the American West, especially in California. Their thriving herbal business survived a racist, hostile society which treated the Chinese as an inferior race, Chinese civilization as an alien culture, and channeled many of the Chinese immigrants into racialized occupations in the laundry and restaurant sectors. The examination of the history of Chinese herbalists, therefore, offers new insights into racial discourse. The herbalist's career enriches our understanding of the American West as a culturally diverse region. For a long time, the American medical profession was a field in which many different ethnic healing systems co-existed and competed with each other for clientele. Chinese herbal medicine was one of the most successful practices in this field. Its success as an ethnic heritage in a racially stratified society also requires us to make further inquiry into the resilience of ethnic culture. The viability of a culture often depends on whether its agents can creatively practice it as both a form of accommodation and resistance. To document the activities of Chinese herbalists involves addressing the issue of dependence and autonomy between the minority and dominant societies and re-centering Asians in U.S. history. [End Page 173]

The Rise of Chinese Herbal Medicine

Many pioneer Chinese immigrants possessed some medical knowledge and knew how to cure minor disease or injury with herbal medicine. Medical knowledge was popular among Chinese immigrants, because it had long been considered "benevolent" and was important for the proper fulfillment of filial duties in Chinese society. ² In 1869, the *Overland Monthly*, a San Francisco-based journal, carried an article that noted: "Judging from the number of their apothecary stores, one would suppose that the Chinese were large consumers of medicines." ³ In 1964, the Chinese Historical Society of America in San Francisco examined personal belongings left in three sub-basements by Chinese immigrants with the Son Loy Company for safe-keeping during the turn of the century. Almost all of the boxes and trunks examined contained some Chinese herbs or medicines. ⁴ Early Seattle Chinese immigrants benefited collectively from an herbal recipe book which contained the best personal recipes of the members of the Chinese community. Though the book originally belonged to the Wah-Chong Company founded in 1868, it was considered community property and served everyone when no professional herbalists were available. ⁵ Fiddletown in Amador County, California has preserved the old Chew Kee Herb Shop, which Fung Jong Yee opened in 1851 and operated for fifty-three years until his death in 1904. ⁶ In the pioneer days of the mid-nineteenth century, Chinese stores supplied their immigrant patrons with not only food and clothing but also herb medicine and other health care items.

When Chinese communities expanded in size and wealth, professional herbal doctors, herbal stores, and dispensers appeared. The service provided by herbalists was a source of cultural comfort to the early Chinese immigrants. Patients could communicate easily with the physicians about their symptoms. Drinking herbal tea was a familiar treatment used by the Chinese for several thousands of years. Early Chinese immigrants preferred Chinese medicine to Western medicine, a choice that gave rise to the herbal shops and practice. ⁷ However, Western medicine was not totally foreign to the Chinese, especially those from the Guangzhou (Canton) area. Early missionary doctors' books recorded [End Page 174] the presence of many medical institutions affiliated with Western missionaries. ⁸ In fact, some wealthy Chinese immigrants in the U.S. sought out Western medical treatment for ailments that required surgery. But in general, herbal medicine was the only treatment available to the early Chinese immigrants, because public medical facilities denied admittance to and segregated Chinese patients in the nineteenth century.

During that period, racist newspapers and health officials described Chinese immigrants as carriers of alien diseases. Chinese passengers were subjected to medical examination upon their arrival in the U.S. Their residential areas were frequently inspected for disease and quarantined. A historian noted that in 1881 the ship *Septima* arrived in Honolulu with 699 Chinese passengers. All of them were detained in quarantine. In December 1899, the Hawaiian Board of Health removed 4,500 Chinese to a quarantine camp, and the Chinese quarter was incinerated after two cases of bubonic plague were reported. ⁹ When San Francisco suffered from a smallpox epidemic outbreak in 1876, the city health authority had every house in Chinatown fumigated, but the epidemic still claimed many lives. Unable to deal with the plague, the city official blamed the "lying and treacherous Chinamen" who ignored the

"sanitary laws." ¹⁰

But the sanitary conditions in Chinatown were actually better than in many neighborhoods in the city. Mary Coolidge, a pioneer scholar on Chinese immigration, noted that the death rate in Chinatown in 1876-78 decreased six per thousand while there were 1,378 deaths in San Francisco during the smallpox epidemic outbreak. ¹¹ The public health issue was merely an argument to define the Chinese as an inferior race. In the local political campaign in 1885, the San Francisco board of supervisors made a horrifying report about the sanitary conditions in Chinatown. Unable to account for the Chinese immunity from bacterial diseases, they attributed it to opium smoking. To dispense with such a ridiculous conclusion, Coolidge pointed out that the Chinese were exceptionally free from venereal diseases because they had a careful diet, clean personal hygiene, and drank only tea or boiled water. ¹²

While Chinatown was accused of being a haven of hidden threats to American health, city and county public hospitals denied access to Chinese **[End Page 175]** patients. Between 1870 and 1882, the Chinese population grew to about 110,000 in California and constituted 10 percent of the state, and 5 to 8 percent of San Francisco's population. But admissions of Chinese patients was less than 0.1 percent in the city hospital or other public health facilities. ¹³ There Chinese patients were usually "shunted off to a smallpox or pest hospital or to a special building, originally operated exclusively for the Chinese and later designed as the Lazaretto or Lepers' Quarters." ¹⁴ Under these circumstances, the Chinese community had to take action on its own.

By the late nineteenth century, San Francisco's Chinatown had become the largest Chinese community in the U.S. To meet the needs of their community, each clan or district organization set up a clinic for its own aged and ailing members. In addition, the Chinese Consolidated Benevolent Association and Chinese consul general in San Francisco planned to establish a general hospital in Chinatown, as had the French and German communities, but the city authorities repeatedly rejected and delayed the proposal. Finally, in 1899, the Chinese were allowed to establish a hospital, although the hospital closed down within a year because it hired only Western physicians who could hardly meet the needs of the community. In 1900, the Chinese set up the Tung Wah Dispensary at 828 Sacramento Street and hired both Western and Chinese doctors, although the Chinese doctors had to work in conjunction with licensed white physicians. ¹⁵

While the Chinese Consolidated Benevolent Association struggled to set up a general hospital for the community, Chinese herbalists opened their own practices to serve the needs of Chinese patients. By the mid-1850s, San Francisco's Chinatown had grown to be a bustling place with more than eighty stores of various kinds. Five of them were herb shops. ¹⁶ An 1869 article in *Overland Monthly* observed that there were a dozen profitable herbal shops in San Francisco, and "the Chinese, wherever they go, are followed up pretty closely by men professing to be skilled in the healing art." ¹⁷ An article of 1899 from *Lippincott's Magazine* also said that there were many Chinese herbal physicians in San Francisco and other cities of the Pacific Coast, and a few established themselves in Eastern cities. ¹⁸ In more recent works, Jeffrey Harlow and **[End Page 176]** Christine Richardson have documented the activities of Chinese herbalists in Oregon, while Paul Buell and Christopher Muench have written about them in Seattle and Idaho. ¹⁹

Although it is difficult to determine the precise number, there were probably several hundred Chinese herbalists in the late nineteenth- to early twentieth-century American West and other regions as well. An article entitled "Chinese Drug Stores in America" in *The American Journal of Pharmacy* in December 1887 noted that there were at least four herbal shops in Philadelphia, and "day and night their clerks are busy, weighing and pounding and tying up packages for the relief of their suffering countrymen." ²⁰ According to herbalist Lui Garding's estimate, there were more than 120 herbalists in California as late as 1948, and one third of them were in Los Angeles. ²¹ That is a sizable number considering the decades of racial discrimination against Chinese herbalists' and their practice.

From a Benevolent Skill to An Ethnic Profession

Chinese herbal practice in the U.S. was a transplanted medical skill. Though not being the world's earliest recorded medical system, Chinese medicine is the oldest continuously surviving tradition. "The earliest surviving pharmacopoeia, the Pen-ts'ao ching attributed to Shen-nung, was probably compiled in the first century B.C." ²² Through centuries of empirical experiments, Chinese traditional medicine has been developed into a systematic body of medical knowledge with complex theories and various specializations such as pharmacology, pulsology, acupuncture, and moxibustion. Diagnostic methods include visual observation, inquiry into case history, auditory symptoms, and pulse-taking. In imperial China, there were official medical posts attached to the court bureaucracy, and medical training had been offered in the Imperial College of Medicine since the Tang Dynasty. The most prestigious doctors were medical scholars who acquired their knowledge from classical medical texts. They offered their service only in the royal court or practiced it as a benevolent skill among families and friends.

In the U.S., however, herbal practice followed a different pattern. **[End Page 177]** Chinese herbalists acted as professionals and were primarily businessmen. They engaged in every aspect of the trade: building a commercial network, importing herbs, advertising their professions, and dispensing medicine. Most Chinese herbalists were both pharmacists and pulsologists. Because pulse diagnoses were usually free, profits only came through selling herbal medicine. Some herbalists may have begun their career by selling herbs and filling prescriptions, but eventually most practitioners became physicians who wrote prescriptions and sold herbs. A good herbal business may have hired three to four assistants to prepare and dispense the medicines, as well as to be responsible for bookkeeping. Their salary was from \$25 to \$30 a month, similar to unskilled Chinese laborers, though their work was a lot lighter and sometimes they received additional compensation. ²³ Herbal medicine could also be a family business like a restaurant or grocery store, which used unpaid or under-paid family members. Los Angeles herbalist Chang Yitang, for example,

ran a herbal shop by himself when he first arrived in this country. But the business became a family affair after he married Nellie Yee, an American-born Chinese woman, who spoke and had a reading knowledge of both Chinese and English. ²⁴

Herbal medicine was essentially a profitable business. Many herbal physicians lived much wealthier lives than the laboring class Chinese. Before his death in 1893, herbalist Li Putai maintained a huge house for his family with a yearly income of \$75,000. ²⁵ He was one of the wealthiest Chinese in San Francisco. Herbalist Fong Wan's office on Oakland's Tenth Street was so glamorous that it attracted hundreds of visitors. Among his employees was an attendant whose full-time job was to provide tours of the house. Tan Fuyuan (Tom Foo Yuen), Tom Leung, Tan Feixuan, and Chang Yitang of Los Angeles and Su Shaonan (L. T. Sue) of Hanford, California were some of the famous Chinese herbalists of the time. They all built spacious offices even by contemporary California standards and some of them had more than one place of business. Some of them may have had some of the largest numbers of patients--Chinese and non-Chinese--among all medical practitioners at that time. Commenting on Tan Fuyuan's company, *Lippincott's Magazine* in 1899 claimed that with the possible exception of one or two well-advertised [End Page 178] doctors, Tan had more patrons than any of the 350 physicians in Los Angeles. Many of his patients were well-to-do people, including businessmen, lawyers, journalists, and even physicians and their families. ²⁶ Historian Sucheng Chan noted that during the Chinese massacre of 1871 in Los Angeles, a few white men were so impatient to rob the gold rings of a Chinese herbalist that they cut off his fingers. ²⁷

Herbal therapy was not unknown in America. Native American medicine included the use of herbs. More than 200 drugs used by American Indians were official medicines in *The Pharmacopeia of the United States of America* since its first edition in 1820. Due to Native American influence, many white folk practitioners on the East Coast called themselves "Indian doctors" during the colonial and frontier periods. ²⁸ Historian William Rothstein noted that during the colonial period, "medical botanicals were planted in family gardens, gathered wild, and published in local stores and from itinerant peddlers. Recipes for drugs were published in 78 almanacs and newspapers and were passed from generation to generation and from family to family." ²⁹ Inadequate Western medical facilities, the inability of Western medicine to cure some diseases, and the lack of standardization of medical practice were the main reasons for the prosperity of various healing systems. Rothstein defines eighteenth-century America as a period of medical individualism when anyone could practice the healing arts with almost no legal constraints. ³⁰ Another scholar viewed the nineteenth century as the heyday of "patent medicine" quackery. ³¹

Chinese herbal medicine apparently co-existed with a variety of other medical practices. The herbalists' commercial advertisements often appeared alongside those of chiropractors. Some chiropractors practiced together with herbalists, both of whom offered non-traditional medical treatments that might have served as the basis for cooperation. Chang Yitang, for example, worked with a Mr. Holmes, a chiropractor, for several years. ³² Holmes' willingness to team with a Chinese herbalist in medical practice possibly indicated the attraction of non-traditional medicine to the same group of potential clients.

At the same time, practitioners who had not been trained in orthodox medical schools or failed to follow orthodox medical principles [End Page 179] were labeled as "quacks" or "folk doctors," although the American Medical Association could do little about these practitioners before 1906 when the Pure Food and Drug Act was passed. Beginning in the early twentieth century, healing systems such as chiropractic and botanical healing performed mainly by whites only gradually achieved legal status. Hundreds of chiropractors were arrested for practicing medicine without a license in the early twentieth century. To fight for their legal status, the Chiropractors Association of Alameda County, California requested its members to protest and go to jail rather than pay a fine.

When public opinion favored the chiropractors, in 1923, California's governor pardoned all chiropractors in jail. ³³ Chinese herbalists, however, were never granted licenses to conduct medical diagnoses.

Crossing Ethnic Borders

Although they operated in a hostile racial environment, Chinese herbalists successfully expanded their clientele from Chinese to non-Chinese patients. As early as 1858, herbalist Hu Junxiao (Tsun Yuen Wo) in San Francisco Chinatown used English-language signs on his shop to attract white patients. ³⁴ According to an 1899 article, Li Putai was the first doctor to leave his countrymen and practice among whites, advocating his system of medicine and establishing a lucrative practice. The report added that Li's son and nephew were Chinese herbalists who spoke English and whose practices were exclusively among the English-speaking populace in the Los Angeles area. ³⁵

In fact, many herbalists had more white than Chinese patients. At times, necessity required that clientele. Herbalist Ing Hay, for instance, increasingly catered to white clients as the Chinese population declined in eastern Oregon during 1900-10. ³⁶ Chang Yitang of Los Angeles established his herb office in a shopping center on Ninth Street where there were Chinese and Japanese produce distributors and a number of middle-class Chinese families. Because the area was essentially a white neighborhood, Chang treated white clients in his office by day and went to visit Chinese patients in Chinatown in the evening. During Chang's herbalist career, his family moved several times, but they always chose to [End Page 180] live outside Chinatown. ³⁷ Chang's contemporary herbalists like Tan Fuyuan, Tom Leung, and Li Wing all had more white than Chinese clients. In a booklet to attract white patients, Tom Leung claimed that he had "made a study of the special uses of the remedies in the treatment of the disease of white people." ³⁸ In 1933, herbalist Fong Wan wrote that white demand for Chinese herb medicine had been steadily increasing, and "the American patrons far outnumber the Chinese." ³⁹

In targeting white clients, Chinese herbalists actively used commercial advertising and publicized their business in the local, English-language newspapers. According to a study by Raymond Lou, commercial advertisements for Chinese physicians as large as a half-page began to appear in Los Angeles' newspapers in the early 1870s, and some had sketches of themselves measuring

the pulse of white patients. Some were printed in Spanish, apparently to target Mexican clients.⁴⁰ Chinese herbal medicine also attracted Japanese immigrants. San Francisco-based Japanese-language newspapers *Nichibei* (News) and *Shin Sekai* (New World) frequently carried Chinese herbal medicine advertisements during the 1920s and 1930s.⁴¹ When Chang Yitang sent his eldest son to practice herbal medicine in Salt Lake City in 1919, he advertised in many of the newspapers there, including the *Greek Daily*,⁴² to appeal to the large Greek community.⁴³

Hiring white interpreters and receptionists was another approach to solicit white clients and was commonly practiced among more established herb physicians, like Chang Yitang who found a white partner, Holmes, when he started his business. Usually those interpreters or partners knew little or nothing about the Chinese language, let alone herb medicine, and Holmes' Chinese was only good enough to greet Chinese clients in Cantonese.⁴⁴ Tom Leung's interpreter, a Mr. Hallowell, could not speak Chinese at all.⁴⁵ They functioned more as cultural intermediaries than as interpreters for the white clients. Similarly, some herbalists hired Mexican women who could speak both English and Spanish in order to attract Mexican clients.

In their offices, Chinese herbalists used different styles of dressing. While some wore Chinese robes and round Mandarin hats, others dressed in Western three-piece suits. Apparently, some wanted to look [End Page 181] like "authentic" Chinese herbalists, while others wished to look more like European professionals. In their advertisements, photographs of herbalists in traditional Chinese clothes often were printed side-by-side with those in Western suits.

When they served their clients, Chinese herbalists emphasized the cultural features of their skill. As proof of "authenticity," many claimed that their skill was a family tradition for generations, or that they were graduates of the Imperial Medical College. In his advertisements, Tan Fuyan presented himself as a former official physician to the Emperor of China, with a photograph of him in Mandarin hat and robe. His pamphlet always contained a copy of the certificate issued by the Chinese consul general in San Francisco that indicated Tan was a graduate of the Imperial Medical College in Beijing.⁴⁶ Tom Leung claimed that his grandfather was a physician to the Emperor of China, and that his father was also a doctor. Moreover, he claimed to have studied at the Imperial Medical College for three years.⁴⁷ Nonetheless, even Tom Leung's children were suspicious of their father's claims.⁴⁸ Fon Wan, an herbalist in Oakland, wrote that he had passed the Imperial Chinese literary examinations of the first degree in medicine.⁴⁹

Chinese herbalists published booklets and pamphlets, and distributed flyers. Tan Fuyuan's 1897 booklet, *Science of Oriental Medicine*, was followed by *Chinese Herbal Science* written by Tan's former partner and then competitor Tom Leung in 1928. Fong Wan published his *Herb Lore* in 1933,⁵⁰ and Lui Garding, a Los Angeles herbalist, published *Secrets of Chinese Physicians* in 1943.⁵¹ Those writings were not only commercial promotions, but also publications intended to combat racist attacks on herbal medicine. Although it is difficult to ascertain if these herbalists actually wrote those publications, they possessed a knowledge of Chinese herbal medicine and translated and explained it to American society. In their writings, Chinese herbalists maintained that herbal medicine was not a piece of exotic culture, but a transplanted skill to serve the needs of American society. No doubt, those herbalists possessed a consciousness of being culturally Chinese, but they were also aware that they were interacting on a daily basis with a diverse local population. [End Page 182]

Resistance Against Racism

Because of sensational newspaper reports that depicted Chinese herbal medicine as a pseudo-science that deployed sharks' fins, spider eggs, dried toads, and dragon bones, Chinese herbalists persisted in carrying out vigorous campaigns against stereotypes and distortions of their profession. They sometimes engaged in pen wars in newspapers with racist white physicians, and published booklets to defend and promote their profession. When Tan Fuyuan opened an office in Redlands in 1893, he attracted many patrons and aroused jealousy from white physicians who attacked his therapy methods and Chinese traditional medicine in general in the *Redlands Citrograph*, a local newspaper. To fight back, Tan had the *Leader*, a rival newspaper, publish testimonials by his patients warmly acknowledging his skill as a physician. Ironically, this pen war gave Tan greater exposure and brought him more clients. In 1895, Tan opened another office in the city of Los Angeles.⁵²

But his pen war with racist critics of Chinese herbal medicine did not cease. On June 15, 1895, the *Los Angeles Express* published a speech delivered at the Conference of the Southern California Medical Association by the Association's president, Dr. P. C. Remondino. Calling Chinese medicine "a nasty absurd medication that his poor great great great grandfather was obliged superstitiously to swallow to keep body and soul together," Remondino told his audience that Chinese medical training consisted of studying the relationship of astrology to disease and to therapeutics. "All disease and medicines have their astrological affinities and the administration of a medicine should be in accordance with its color, the planet in the heavens," declared Remondino. "For instance, medicine for the liver should be green . . . All black blackish medicine are for the kidneys, reddish medicines for the heart and white medicines go to the lungs."⁵³

In rebuttal, Tan Fuyuan denounced Remondino's distortion of herbal medicine with an elaborate article published in the *Los Angeles Daily Times* on August 15, 1895. In his rejoinder, Tan scored European medicine's failures, and alleged that some physicians of Western medicine could not even cure diseases they themselves were suffering and had [End Page 183] to go to Chinese herbalists for healing. Western doctors, wrote Tan, employed chemicals such as mercury and morphine to which Chinese physicians never resorted, and he quoted from many supportive testimonies from his patients, including a brother of the former Los Angeles mayor. Tan made the following comparison between his profession and that of Remondino.

The word medicine, as employed by an American physician, means a mineral or poisonous drug. As used by a Chinese physician, it means an herb. This is the fundamental distinction between the two systems. Many of the

inventions of my forefathers, such as gunpowder and printing, were adopted by the so-called civilized world centuries after they were in general use in my country, and I believe that the time is not far distant when the principles of Chinese medicine will be adopted in this country. ⁵⁴

The article provoked another response from Remondino to which Tan in turn replied. ⁵⁵ The debate generated a great deal of attention, and after that series of heated exchanges, Tan published his 1897 booklet, *Science of Oriental Medicine*, which contained many supportive letters from his white patients, some of whom proposed that a College of Oriental Medicine be established in Los Angeles. ⁵⁶

To defend themselves against racial stereotypes, Chinese herbalists oftentimes claimed the greatness of Chinese civilization and therewith distanced themselves from the concerns of the laboring Chinese and white workers alike. To deflect racism, Chinese herbalists deployed classism. They alleged that ordinary white people were ignorant of Chinese civilization and thus failed to distinguish between themselves--the educated elite--and the laboring class. To prove their point, Chinese herbalists quoted prestigious, Western academic sources on Chinese medicine. For example, in the first chapter of his *Science of Oriental Medicine*, Tan Fuyuan quoted from the *Encyclopedia Britannica*, that praised the Chinese as first-rate artisans in every kind of manufacture, and noted that "their physicians have a thorough knowledge of the virtue of herbs, and an admirable skill in diagnosing by the pulse." ⁵⁷

Besides their intellectual battles, mainstream medical organizations resorted to legal means and enlisted the help of law enforcement agencies [End Page 184] to attack Chinese herbalists. William Tisdale noted that Chinese herbal medicine was not recognized by law in California, and the state's judicial records showed that many Chinese herbalists had been arrested and fined. ⁵⁸ The pioneer herbalist Li Putal was subjected to frequent legal harassment in the early years of his practice until he secured the assistance of Senator Leland Stanford and Governor Mark Hopkins for his protection. When Tan Fuyuan moved to Los Angeles, Dr. C. A. Stoddard of San Bernardino, apparently envious of Tan's success, had him arrested on a charge of illegal medical practice. ⁵⁹

Fong Wan of Oakland, called the "King of the Herbalists," was well-known in the San Francisco area, having treated several thousand patients between 1915 and the mid-1930s. According to Fong, a campaign against Chinese herbalists was in full force from 1929 to 1932 involving people from all walks of life. For example, postal officials sent fraud orders to Chinese physicians in order to entrap them, and searched their letters for incriminating evidence that could convict them. Fong was repeatedly sued by Western doctors and government agencies and had to appear many times in both local and federal courts. They sued him for practicing medicine without a license, for using herbs that offered no cure, and for violating interstate commerce law when advertising outside California. On July 29, 1931, Fong was indicted by a federal court on sixteen counts on the basis of testimony from pharmacologists, postmasters, professors, chemists, and physicians, but the jury returned a verdict of not guilty. Before that trial, Fong had won twenty judgments in police court, and one case in California's Supreme Court. In 1925, when an anti-herb bill was introduced into the state Assembly, Fong travelled to Sacramento and there presented arguments and facts that were instrumental in having the bill withdrawn. ⁶⁰

To counter such legal harassment, Chinese herbalists used the testimonies of white patients and hired white lawyers to defend them if they had to appear in court. For example, Tom Leung hired attorneys Thomas White and Paul Shenck, both famous southern California lawyers, to represent him in litigation. ⁶¹ White employees of Chinese herbalists helped to intervene with courts, the police, and the banks for bail money. And because their clients were oftentimes white, Chinese [End Page 185] herbalists seldom relied on the Chinese Consolidated Benevolent Association, a common practice among Chinese Americans, and instead appealed for help from American society at large. Under the name of the Herb Dealers' Protective Association of California, Fong Wan issued a pamphlet in Oakland in 1925, that declared:

The American Public has always been in favor of the herbs; persons who have been freed from pain and have felt their strength return have not been backward in expressing appreciation of the harmless herbs so wisely provided by Mother Nature Nevertheless, the Chinese Herb Dealers have suffered incessant persecution at the hands of certain Special Agents and their Stool Pigeons Years ago, the Christian Scientists and the Chiropractors had similar unhappy experiences because of the provisions of the Medical Laws. They stood their ground valiantly and the public stood loyally behind them. Now they have their own Examiners and are recognized as belonging to legitimate schools of healing. The Chinese Herb Dealers, being but few in number, are in a very difficult situation and undergo the greatest hardships at the hands of the Medical Examiners. All that the Herb Dealers ask for is fair play and the backing of all persons interested in herbs. ⁶²

The pamphlet revealed that Chinese herbalists were defending not only their culture, but also a medical skill popular in American society as a whole.

Herbalists used different strategies to respond to legal harassment. Tom Leung, who was arrested many times for practicing medicine without a license, did not easily give up the title of doctor. His daughter Louise Leung Larson vividly recalled how Chinese herb physicians in southern California were harassed during the first two decades of the twentieth century:

Father did well as an herbalist, too well, in the opinion of the American Medical Association and the Board of Medical Examiners. He and the other Chinese herbalists in Los Angeles at that time were accused of practicing medicine without a license because they used the title "Doctor" and felt the pulse as one way of diagnosis. Papa was a special target and was arrested over 100 times on the misdemeanor charge The police, at times, used stool pigeons--people pretending to be patients--and would arrest Papa after the usual consultation. Sometimes

[End Page 186] a whole squad of police would arrive in a patrol car and raid our home. I came to view the AMA and the Board, as well as the police, as our mortal enemies. Papa was unflappable, even the time when he was hauled off in the patrol wagon. He had set up a routine for these crises. As soon as the police came, the secretary phoned A. C. Way of the First National Bank to arrange for bail. ⁶³

According to Larson, only after Leung ceased to call himself a doctor and changed his company name to "Leung Herb Company" did the harassment diminish.

Chang Yitang was also charged by local medical organizations in Los Angeles for claiming to be a physician without a doctor's degree. When they demanded that he stop his medical practice, Chang responded by keeping a low profile. His son Arthur recalled:

They were medical societies questioning father whether he treated patients or not. He always said that he was a herb seller. He never advertised his business. His patients were all referred by other patients. He did run into some trouble before he got out [of] it. ⁶⁴

Chang's children remembered that their home was searched and their father frisked by a big and tall police man, but no one was arrested. To operate his herb business, Chang had a drug store license and worked with his white partner, Holmes, who had a chiropractor's license. With Holmes' license, Chang saw patients. In their advertisement, Holmes was presented as the doctor and superintendent with Chang, as the manager. Chang acquired new clients through referrals from his patients. By keeping a low profile and offering services to both white and Chinese patients, Chang survived racist discrimination and conducted his herb business through the late 1940s.

After World War II, Chinese herbal medicine declined rapidly. A federal ban on Chinese imports following the establishment of the People's Republic of China in 1949 and the onset of the Korean War during the 1950s dealt a huge blow to the practice. The U.S. embargo on Chinese imports was enforced when the Chinese army entered the Korean War at the end of 1950, resulting in a suspension of trade between the U.S. and China. After having played a role in the American health care system for decades, many Chinese herbalists were forced to [End Page 187] close their businesses or switch to chiropractic work. Lui Garding noted that more than a dozen Chinese herbalists in Los Angeles became chiropractic therapists because of the limited availability of herbs from China during the post-1950s. ⁶⁵

The history of Chinese herbalists has special importance to Asian American studies. It demonstrates that early Chinese immigrants possessed a variety of work skills and came from many different socioeconomic backgrounds. Chinese contributions to American society were not limited to agriculture, manufacturing, or railroad construction. When racial hostility drove the Chinese into ethnic ghettos (usually within cities) and forced them to engage in menial and service occupations that whites were unwilling to pursue, laundries and restaurants became trademarks of Chinese ethnicity (whereas the Chinese only pursued those occupations after their arrival in the United States). Different from laundries and restaurants, herbal medicine was one arena in which the Chinese created a profession that required skills and knowledge that devolved from ethnic Chinese culture. Its history deserves attention because it demonstrates how a group of Chinese Americans deployed an ethnic skill to resist being channeled into racially defined occupational niches.

Furthermore, Chinese herbalists crossed racial and ethnic borders and served both Asian and non-Asian communities. That transgression exemplifies how the Chinese functioned as "founding participants in Western American society" and helped transform the Western social landscape. ⁶⁶ The rise of Chinese herbal medicine, on the one hand, reveals the American West as a much more colorful, complicated, and culturally diversified region than the Turnerian school of Western history has assumed. The decline of this system of medicine, on the other hand, illustrates how racism has repeatedly defined minority cultures as the "other," racialized and excluded them, and attempted to shape American national culture from a terrain of ethnic intersections into a racially stratified one. As a part of Asian American history, the story of Chinese herbalists challenges ethnically exclusive history and helps us "revitalize and reconceive the history of the American West." ⁶⁷

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Notes

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2. According to Ralph Crozier, established Chinese scholars with medical knowledge practiced medicine out of purely benevolent motives. Ralph Crozier, *Traditional Medicine in Modern China: Science, Nationalism, and the Tensions of Cultural Change* (Cambridge: Harvard University Press, 1968), 14.

3. A. W. Loomis, "Medical Art in the Chinese Quarter," *Overland Monthly* 2 (June 1869): 496.

4. Thomas W. Chinn, H. M. Lai, and Philip Choy (eds.), *A History of the Chinese in California: A Syllabus* (San Francisco:

Chinese Historical Society of America, 1969), 9, footnote 1.

5. Paul Buell and Christopher Muench, "Chinese Medical Recipes from Frontier Seattle," in *The Annals of the Chinese Historical Society of the Pacific Northwest*, edited by Douglas Lee (Bellingham, Washington: Chinese Historical Society of the Pacific Northwest, 1984), 102.

6. Charles Hilliger, *Hilliger's California* (Santa Barbara: Capra Press, 1997), 25-26.

7. Liu Boji, *Meiguo Huaqiao Shi* (A History of the Chinese in the United States of America) (Taipei: Commission of Overseas Chinese Affairs, 1976), 314.

8. John G. Kerr, *A Guide to the City and Suburbs of Canton* (Hong Kong: Kelly and Walsh, 1904); and Jonathan D. Spence, "Medicine," in *Chinese Roundabout: Essays in History and Culture* (New York: W. W. Norton, 1992), 213-18.

9. Shih-shan Henry Tsai, *The Chinese Experience in America* (Bloomington: Indiana University Press, 1986), 29.

10. Joan B. Trauner, "The Chinese as Medical Scapegoats in San Francisco, 1870-1905," *California History* 57:1 (1978): 72.

11. Mary R. Coolidge, *Chinese Immigration* (1909, reprint, New York: Arno Press, 1969), 417.

12. *Ibid.*, 414-16.

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14. Trauner, "Chinese as Medical Scapegoats," 82-83, 73.

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[34.](#) Liu, *Meiguo Huaqiao Shi*, 314.

[35.](#) Tisdale, "Chinese Physicians," 412.

[36.](#) Barlow and Richardson, *China Doctor*, 64.

[37.](#) Interview with Nellie Yee.

[38.](#) Tom Leung, *Chinese Herbal Science* (Los Angeles: n.p., 1928), 8.

[39.](#) Fong Wan, *Herb Lore* (Oakland, n.p., 1933), 5.

[40.](#) Raymond Lou, "The Chinese American Community of Los Angeles, 1870-1900: A Case of Resistance, Organization, and Participation," Ph.D. dissertation (University of California, Irvine, 1982), 44, 72.

[41.](#) Yuji Ichioka of UCLA kindly showed me copies of these newspapers.

[42.](#) Copies of advertisements from the Chang family are in the author's possession.

[43.](#) Helen Zeese Papanikolas, *Toil and Rage in a New Land: The Greek Immigrants in Utah* (Salt Lake City: Utah Historical Society, 1974).

[44.](#) Interview with Nellie Yee.

[45.](#) Louise Leung Larson, *Sweet Bamboo: A Saga of a Chinese American Family* (Los Angeles: Chinese Historical Society of Southern California, 1989), 21.

[46.](#) Tan Fuyuan, *The Science of Oriental Medicine* (Los Angeles: n.p., 1897), 91.

[47.](#) Leung, *Chinese Herbal Science*, 8.

[48.](#) Larson, *Sweet Bamboo*, 19-20.

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[51.](#) Lui Garding, *Secrets of Chinese Physicians* (Los Angeles: B. N. Robertson, 1943).

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[60.](#) Fong, *Herb Lore*, 34-51.

[61.](#) Larson, *Sweet Bamboo*, 72.

[62.](#) A copy of this pamphlet is in the author's possession.

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[66.](#) Patricia Nelson Limerick, "Common Cause? Asian American History and Western American History," in *Privileging Positions: The Sites of Asian American Studies*, edited by Gary Y. Okihiro et al. (Pullman: Washington State University Press, 1995), 98.

[67.](#) *Ibid.*, 84.

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